

$$\frac{\partial^2 \mathcal{L}}{\partial \alpha^2} = \frac{1}{\alpha^3} \left( \frac{1}{2} \right) = \frac{1}{2\alpha^3} \quad \frac{\partial^2 \mathcal{L}}{\partial \alpha \partial \beta} = \frac{1}{\alpha^2} \left( -\frac{1}{2} \right) = -\frac{1}{2\alpha^2} \quad \frac{\partial^2 \mathcal{L}}{\partial \beta^2} = \frac{1}{\alpha} \left( \frac{1}{2} \right) = \frac{1}{2\alpha}$$

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# TRANSMITTAL FORM

JC474 U.S. PTO  
10/064779  
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Electronic Version 1.0.3

Stylesheet Version: 1.0

Attorney Docket  
Number:

H-  
323

Submission Type: Utility Patent  
Filing

## LIGHT MODULATION BY FRUSTRATION OF TOTAL INTERNAL REFLECTION

First Named Inventor: Mr. Karl R. Amundson

### SUBMITTED BY

Name: Mr. David John Cole  
Registration Number: 29629  
Electronic Signature Mark: /Shipley/ Date Signed: 20020816

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### Attached Files:

|                  |               |
|------------------|---------------|
| specification    | H323.xml      |
| ibid-transmittal | H-323apds.xml |
| fee-transmittal  | H-323fee.xml  |



Comments:

# FEE TRANSMITTAL

Electronic Version 1.1.0

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*Patent fees are subject to annual revisions on or about October 1st of each year.*

Small Entity

Small Business Concern

**TOTAL FEES AUTHORIZED: \$ 1210**

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

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Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

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## SUBMITTED BY

Authorized Name: David J. Cole

Electronic Signature Mark: /Shipley/

Date Signed: 20020815

## BASIC FILING FEE

| Fee Description    | Fee Code | Fee Paid |
|--------------------|----------|----------|
| Utility Filing Fee | 201      | \$ 370   |

Subtotal For Basic Filing Fee: \$ 370

## EXTRA CLAIM FEES

|                        | Fee Code | Fee   | Extra Claims | Fee Paid |
|------------------------|----------|-------|--------------|----------|
| Total Claims: 38       | 203      | \$ 9  | 18           | \$ 162   |
| Independent Claims: 12 | 202      | \$ 42 | 9            | \$ 378   |

**Subtotal For Extra Claims Fees: \$ 540**

| Fee Description                                    | Number | Quantity | Fee Code | Amount | Fee Paid |
|--|--------|----------|----------|--------|----------|
| Publication Fee For Early or Voluntary Publication |        | 1        | 195      | \$ 300 | \$ 300   |

**Subtotal For Additional Fees: \$ 300**